2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2014
Secretary of State
CC7098433043

DOCUMENT# L02000029945

Entity Name: SOUTHWEST FLORIDA EYE CARE, L.L.C.

Current Principal Place of Business:

6850 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912

Current Mailing Address:

6850 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912

FEI Number: 14-1858252

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALMON, FLORENTINO EM.D.
6850 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	PALMON, FLORENTINO E	Name	AVRIL, LEONARD F
Address	6850 INTERNATIONAL CENTER BLVD	Address	6850 INTERNATIONAL CENTER BLVD
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEONARD AVRIL MGMR 02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date